

Goddard Space Flight Center Furniture/Design Services Work Request



See reverse side of Form for completion instructions

Complete the information below and send to the Engineering Branch, Code 224, or via Fax to 301-286-1747. A Code 224 Representative will contact you within 5 days of receipt of the Form.

Section I - Customer Information (see instructions)

1. Date of Request:		2. Requester Name:	
3. Requester Organizational Code:		4. Requester e-mail Address:	
5. Requester Building/ Room Number:	6. Requester Phone Number:	7. Requester Fax Number:	
8. Location of Service: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Greenbelt Wallops </div>		Building	Room Number
9. (A) Request Type: (B) Request Description:			
<div style="display: flex; justify-content: space-around;"> Interior Design Furniture Repair Backfill </div>			
10. Number of Workstations:	11. Targeted Completion Date:	12. Budget Amount:	
13. Relocating Furniture:			
<div style="display: flex; justify-content: space-around;"> Yes No If Yes, complete Section II </div>			
14. Remarks/Special Instructions:			

Section II - Furniture Relocation Information

15. From Building:	Room No.	16. Point of Contact <i>(if different from Block 2)</i> :	
To Building:	Room No.	Continuation Sheet Attached? Yes No	

Section III - Program Manager/Division Chief Approval (not required for repairs)

17. Signature:
18. Typed Name and Title:

Section IV - CODE 224 OFFICE USE ONLY

19. Date Request Recieved:	20. Work Request Number:
21. Date Task Assigned:	22. Task Assigned To:
23. Design Start Date:	24. Final Design Completion:
25. Final Costs:	26. Contact Date:
27. Comments:	

Instructions For Furniture/Design Services Work Request

GSFC Form 8-22, Furniture/Design Services Work Request must be completed and submitted to the Engineering Branch to initiate a work request for design services. The GSFC 8-22 should be completed as follows:

Section I – Customer Information

1. Date of Request - The date of preparation.
2. Requester Name - The individual initiating the work request.
3. Requester Organizational Code - The org code of the individual initiating the work request.
4. Requester Email Address - The email address of the individual initiating the work request.
5. Requester Building and Room Number of individual initiating the work request.
6. Requester Phone Number of individual initiating the work request.
7. Requester Fax Number of individual initiating the work request.
8. Location of Service – Designate Greenbelt or Wallops, Building and Room Number.
9. (A) Request Type: Check block that describes work being requested.
(B) Request Description: This field is available to provide a description of work being requested.
10. Number of Workstations– Identify the size of the job by indicating the number of workstations being requested.
11. Targeted Completion Date – Provide the expected completion date or date you plan to occupy the space.
12. Budget – If your organization has designated a specific amount of funds for this project, please provide the dollar amount budgeted.
13. Relocating Furniture – Check YES if furniture needs to be moved from current location to temporary location or moved from current location to a new location. Enter NO if this is a new purchase. (If checking YES, complete Section II).
14. Remarks/Special Instructions – Please include any remarks or special instructions for work request.

Section II – Furniture Relocation Information

15. From / To - If YES was checked in Block 13, indicate where the furniture is moving from and where the furniture will move to.
16. Point of Contact – Identify the name of the individual who will act as the POC if different than Block 2.
Continuation Sheet attached? – Indicate if a continuation sheet is attached.

Section III – Program Manager / Division Chief Approval

17. Signature of the approving official (Program Manager or Division Chief).
18. Type Name and Title of Approving Official who will sign Block 18.

Section IV – Code 224 office use only

19. Date Request Received is the date Code 224 logs receipts of the GSFC 8-22.
20. Work Request Number is assigned by the Code 224 Design Representative upon receipt.
21. Date Task Assigned is when a Code 224 Design Representative is assigned the task.
22. Task Assigned To identifies the Design Representative who receives the task.
23. Design Start Date is the planned date the Designer intends to complete the design portion of the task.
24. Final Design Completion is the date the Designer actually completes the design portion of the task.
25. Final Cost is the final cost of the work request.
26. Contact Date is the date the customer was contacted regarding work request.
27. Comments – This field is available for Code 224 to annotate any special information relative to the completion of the task.